

Vaccine Doses Administered Exercise 2010

After Action Conference Call

December 8, 2010
1:00 pm CT

Coordinator: Welcome and thank you for standing by. At this time all participants are in a listen only mode. After the presentation we will conduct a question and answer session.

To ask a question, at that time please press star 1. Today's conference is being recorded, if you have any objections you may disconnect at this time. I would now like to turn over the meeting to your host, Ms. Michele Renshaw, ma'am you may begin.

Michele Renshaw: Thank you, hello everyone and happy holidays. Thank you for joining our call today. This is Michele Renshaw and joining me today are my colleagues from the Immunization Services Division, Howard Hill with McKing Consulting and members of the CRA outreach teams from Northrop Grumman and SRA International.

Today's call is going to be an after action review of our recent DAX 2010 exercise. So on behalf of everyone here, involved here at CDC, I would like to thank you all for your participation, cooperation and support in this important pandemic influenza initiative.

This exercise has demonstrated continued notable collaboration between local, state and federal levels. Today we will be reviewing the recent 2010 Doses Administered Lite Exercise.

We will address the DAX Lite 2010 results, an after action review, a discussion in Q&A and an upcoming results sharing Webinar. The purpose of this call is to gather feedback from the project areas about your experiences with the weekly reporting of doses administered counts to the CRA system.

Along with sharing the results, we will discuss what went well and what could have been done better during the planning and execution of DAX 2010. This feedback process provides us with an opportunity to hear recommendations and suggestions which assist with our evaluation and future planning efforts.

I know you all have probably heard this many times but just for those who may be a little bit new to the program, I would like to begin with a background on why CRA is used to monitor doses administered.

The National Strategy for Pandemic Influenza implementation plan calls for monitoring appropriate use of scarce, pre-pandemic or pandemic influenza vaccine.

To accomplish this, project areas are expected to track pandemic influenza vaccine doses administered at the individual patient level and then send a data subset weekly to CDC.

CRA is used to track the initial doses administered, a critical component of safety and to ensure targeted groups are reached. The CRA system was modified in the past to provide flexible ways for project areas to report vaccine doses administered.

The purpose of our DAX 2010 Lite exercise was to continue to engage and involve project areas on reporting and tracking vaccine doses administered, to

assist project areas in preparing for another pandemic influenza event if one were to occur, to be proactive and maintaining a state of emergency preparedness and readiness, and to provide the opportunity for project areas to test new or improved system capabilities and train personnel.

Now I am going to go into the DAX 2010 results. The total reported doses administered for the period of October 25 through November 9 as of the end of November were 294,386.

By the 15th of November, 19 of the 62 total project areas, which represent 31% of the total, participated in the voluntary exercise. In order to meet reporting requirements, each participant was responsible for submitting counts of influenza vaccine doses administered for each reporting period based on the MMWR week which is Sunday through Saturday.

The deadline for the reporting period was Tuesday by 11:59 pm of the project area's respective time zone. In addition project areas also had to submit counts of vaccine doses administered according the ACIP priority tiers.

Now on to our after action review; the purpose of this structured review is to evaluate this exercise objectively by focusing on the occurrences: what was planned to happen, what actually happened, and why it happened so that our evaluation is measured against pre-determined goals.

For the ease of our discussion we will divide the review into two time periods. The pre-exercise period, which is approximately five months from May through September, and then the actual exercise period October 25 through November 9 2010.

Three different questions will guide our discussion at each of those periods: what was planned or what was expected to happen, what actually happened and why did this happen?

During our pre-exercise period, what we planned and expected to happen was to identify and confirm all the points of contact or POCs for all participating project areas.

What actually happened was that we identified and confirmed the POCs on time. Many project areas have the same POC as last year and new POCs caught on very quickly.

Another event that we had for the Option 1 participants was for you to determine the content format your system will use and select the method your system will use to transfer information by September 8.

What actually happened with that was that the content determination transfer method developing code by submitting test file activities all occurred close to target.

Again for Option 1 participants, what was planned or expected was for project areas to develop any code necessary to create the selected file format and transport the file to CRA by September 17.

What actually happened was that any code that needed to be developed to create a file and send to CRA was completed prior to the start of the exercise.

Again for Option 1 participants, what was planned or expected to happen was to send a test file for evaluation by September 24. What actually happened is

that of the 12 participating project areas who selected Option 1, very few met the September 24 deadline.

However, eight project areas did send in test files before the beginning of the exercise. For the Option 2 and 3 participants, what was planned or expected to happen was to determine the method by which a project area will enter data into CRA by September 24.

What actually happened was that determining the data entry method, setting up clinics and ensuring all users were associated with the correct event and clinic activities all occurred close to target.

For Option 2 and 3 users, if you were - what was expected or planned to happen, if you were entering data at the clinic local level to ensure all clinics entering data into the Web based CRA have been added to the system and assigned to the 2010 doses administered light exercise by October 1.

What actually happened was that this activity did occur on target.

Again through Option 2 or 3 participants, what was planned expected to happen was to ensure that all users that would be accessing and/or entering data into the Web based CRA have been assigned to the appropriate organization or clinic by October 1.

What actually happened was this activity did occur close to target. For all project areas, another activity that was planned or expected to happen was to have digital certificates for all users by October 1.

What actually happened was that for those who had been through the SDN and digital certificate process before obtaining a certificate was simple.

However for new project area POCs the process was unfamiliar and CDC POC intervention and troubleshooting were sometimes required.

By October 1, not all areas had obtained digital certificates, but by the start of the exercise all participants were set up appropriately.

Finally the last activity we had identified in our pre-exercise period for all project areas that was planned or expected to happen was for CDC to provide training to the new points of contact.

What actually did happen was that we had four project area Webinars and training sessions conducted during the pre-exercise period.

This communication provided project areas with necessary information and updates for exercise success.

Also, during this period project areas were assigned a CDC point of contact for direct communication access and timely updates were made to the CRA Web page.

We believe that overall we achieved our goals during the pre-exercise period. Now we will discuss what actually happened during the exercise.

We basically had two main activities for what were planned/expected to happen. The first of those was submitting counts of influenza vaccine doses administered for each reporting period based on the MMWR week.

The deadline for the reporting period was Tuesday by 11:59 pm of the project area's respective time zone. The other activity that was planned or expected to

happen was that the vaccine doses administered would be submitted according to the ACIP priority tiers.

For the first activity of the data submission what actually happened was we had some definitions of what was considered timely and what was considered responsive.

For timeliness we defined that as sending weekly aggregate data by 11:59 pm on Tuesday following the reporting week.

Of the 19 participating project areas, what actually happened was 17 of them, which is 89.5%, submitted data on time during the final week of the exercise period.

One of the things that did happen that we did not anticipate was that Election Day was an observed holiday for many project areas on November 2 which was our first week cutoff for reporting.

So we extended the reporting deadline for those project areas to 11:59 pm on Wednesday. As long as the project areas still got their data in by November 3 they were still considered to be on time.

We also have another of responsiveness which is defined as the number of weeks a project area reported aggregate data to the CRA application during the DAX 2010 light exercise.

At the end of the exercise as of November 9, of the 19 participating project areas, 17 or 89.5% again reported for both reporting weeks.

If we extend the deadline to 11/24, we would have 95% participation. Another thing that we looked at during our exercise was communication activities. So the CRA points of contact were actively involved with their project area counterparts and provided assistance throughout the exercise period including answering questions, facilitating assistance when issues arose and providing technical support.

They sent weekly reminder emails to project area POCs and made telephone calls to follow up with projects areas who are unable to meet the Tuesday 11:59 pm reporting deadline.

In some cases CRA points of contact helped submit doses administered data. Some of the challenges that we identified from our exercise was a number of project areas contacted CDC with technical or other challenges including digital certificate issues, such as expired certificates, problems with downloading the certificate to the computer, things such as that.

That was pretty much expected to happen. We did have some challenges with PHINMS transmission issues, some project areas experienced difficulties transmitting their files through PHINMS and that required a good bit of technical assistance both with the CRA points of contact and the PHINMS Help Desk.

We had some challenges with data file reporting; some of the Option 1 project areas had file formatting issues and some also used the file format that was used for H1N1, even though we had a slightly modified file format for this exercise.

Another challenge was the reporting period; a few project areas experienced a challenge with meeting the reporting deadline, and again the holiday that was in the first reporting deadline proved a bit of a challenge for us.

We had some operational logistic issues with some of the project areas; they had difficulty with some internal processes and operational logistics which prevented them from meeting the deadlines.

Another challenge that we have identified from the exercise was setting up user roles. Some project areas experienced challenges in setting up and assigning public health administrator roles in CRA or did not have a backup for the PHA.

That is something that we need to be sure and communicate better next time. Those are the different issues and our after action that we have come up with so far and reviewing the results.

I would like to thank everyone for responding so quickly to our feedback questionnaire, we have had very high response rate, over 80% already even though there is still another week.

If you have not done the feedback questionnaire yet we would really appreciate for you to do that and we will be sharing those results in our Webinar that we are going to have for January.

But for right now I would like to open the lines for questions and answers. We are open for any discussion, feedback or comments, both positive and negative.

Please maintain a level of respect. When you do have something to say, please identify yourself and what project area you are affiliated with.

Coordinator: We will now begin the question and answer session. If you would like to ask a question, please press star 1 on your touch-tone phone. Please remember to unmute your phone and record your name clearly when prompted.

You may withdraw your question by pressing star 2. Once again, if you would like to ask a question please press star 1 now. Please stand by for our first question.

Our first question comes from Victor, your line is open. Please check your mute button.

Victor Ilegbodu: Thanks for the opportunity. Hi everyone, I was wondering 17 out of 51 projects that participated, do we have any sense why the low response?

Michele Renshaw: We actually had 19. Many of the project areas we communicated with were in the middle of updating their own IISs and had other challenges going on and did not feel that they could participate at this time.

Some did not respond at all, so it is hard to say. However, we thought for a completely voluntary exercise that 31% was a very good response rate and we do appreciate very much your participation.

Victor Ilegbodu: Okay, thank you.

Michele Renshaw: Are there any other reasons that you all know of?

Sarah Waite: No, the majority of people were either updating their system or working on brand new systems. We had a couple of project areas this year who are implementing brand new IIS systems and so they just did not have the manpower or the resources available to be able to participate.

We also had a couple of project areas who knew that there would be some logistical challenges in getting the information from their providers and so they did not want to commit to participating based on the fact that they knew they would not be able to give it 100%.

Sanjeeb Sapkota: And Victor you mentioned 17 out of 51, but actually 19 is our denominator based on participation and all the calculations are based on that.

So when we said 89% we are working against the 19 of the total numbers which is 51. I guess that is what you were trying to indicate but our number is 19.

Michele Renshaw: Thanks everyone.

Coordinator: Our next question comes from Zina Kleyman, your line is open.

Zina Kleyman: Good afternoon. I have more of a comment than a question. I just wanted to thank you – all of you – for opening this exercise and allowing us participate in this exercise because it showed us some issues.

We took a new approach to the exercise - before we were entering data to CRA and this time we just started to extract data directly from the registry which is what we did last year with H1N1, but seasonal flu was a completely different thing.

It opened up a lot of issues for us that need to be fixed before next year. So this exercise was very useful for us at least in New Jersey. Thanks everybody for participating and having it.

Michele Renshaw: Thank you Zina, we really appreciate those comments. That is our main reason for having this exercise because we understand that you know things are not always static in each project area.

You have got new people coming on, you have got new systems you have to deal with, and things are always changing. We feel that having these exercises helps to alleviate those problems and as you say, identify issues early on so that if we do have another pandemic situation or some sort of event where you have to use CRA you will be a lot more prepared and ready to go.

That way, you will not be scrambling around having to change your systems or write code or find people and get the certificates and all that sort of thing. So we appreciate that feedback very much.

Zina Kleyman: Thank you.

Coordinator: Once again if you would like to ask a question please press star 1 now. One moment please. At this time I am showing no further questions.

Michele Renshaw: All right then, we appreciate all of you taking your time to come in on this after action call. Again we anticipated this to be somewhat of a brief call just to let you know what we found so far and you know how the participation went.

We will have certainly more information, and we will actually have a Webinar. Do we have our date for that?

Sarah Waite: We do not have a date set yet but we will be having it some time in January.

Michele Renshaw: It will probably be the middle towards the end of January, probably on Wednesday afternoon, as that seems to work best for everyone. We will be certain to notify you all well in advance of that.

Again we will have that to actually show you at that time instead of just talking, but we just wanted to hear any of your feedback while it was still fresh in your mind about things. Even if you have anything else things you think we could do better next year other than the digital certificate thing.

By the way, we are planning to be migrating to another security model for CRA and we will no longer be using digital certificates so we are anticipating if we have another exercise next year so be prepared for that, that would be a change.

Hopefully it will make things much easier for everyone. But anyhow so - but you know any feedback you have, if you do not feel like speaking up today feel free to send something to your CRA point of contacts or if you want to do it completely anonymously you can put comments in the feedback questionnaire.

We are reading all of those and so anything to help us for next year to make it better or to even say yes, we do need to keep doing this, so we would appreciate that.

Maybe we can get more incentives so we would have higher participation next year as well. So are there any other comments before we end the call? Well

again thank you all so very much for participating in the exercise and for participating in our call and for your continued interest in CRA.

I hope everyone has a nice holiday.

Coordinator: Thank you for participating on today's conference, the conference has concluded, you may disconnect at this time.

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